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Please type a plus sign (+) inside this box → +	PTO/SB/05 (4/98) Approved for use through 09/30/2000. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE			
	espond to a collection of information unless it displays a valid OMB control number.  torney Docket No. 963 P 001			
UILLIT	rst Inventor or Application Identifier John W. Polley			
PATENT APPLICATION	ENT APPLICATION  Title   Ergonomic Surgical Floormat			
I TRANSMITTAL ⊢	press Mail Label No. EL 845499659 US			
(Only for new honprovisional applications under 37 C.F.R. § 1.03(b))	Assistant Commissioner for Patents			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC 20231			
* Fee Transmittal Form (e.g., PTO/SB/17)	5. Microfiche Computer Program (Appendix)			
(Submit an original and a duplicate for fee processing)     X Specification [Total Pages 27 (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Copy			
<ul> <li>Descriptive title of the Invention</li> <li>Cross References to Related Applications</li> </ul>	b. Paper Copy (identical to computer copy)			
- Statement Regarding Fed sponsored R & D				
- Reference to Microfiche Appendix	c. Statement verifying identity of above copies			
- Background of the Invention	ACCOMPANYING APPLICATION PARTS			
<ul> <li>Brief Summary of the Invention</li> <li>Brief Description of the Drawings (if filed)</li> </ul>	7. Assignment Papers (cover sheet & document(s))			
- Detailed Description	8. 37 C.F.R.§3.73(b) Statement Power of Attorney			
- Claim(s)	(With those is all designes)			
- Abstract of the Disclosure 3. X Drawing(s) (35 U.S.C. 113) [Total Sheets 2	e Disclosure			
Drawing(s) (35 0.5.6. 175) [Total Sheets 2] Statement (IDS)/PTO-1449 2 Citations				
. Oath or Declaration [Total Pages 29 ] 11. Preliminary Amendment				
a. X Newly executed (original or copy)	X Newly executed (original or copy)  12. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
b. Copy from a prior application (37 C.F.R. § 1	Copy from a prior application (37 C.F.R. § 1.63(d))  Small Entity  Statement filed in prior application,			
. DELETION OF INVENTOR(S)	13. Statement(s) Status still proper and desired			
Signed statement attached deleting inventor(s) named in the prior application	i. Signed statement attached deleting Certified Copy of Priority Document(s)			
see 37 C.F.R. §§ 1.63(d)(2) and 1.33	(b). 15. Other:			
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL EFEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXI	NTITY L			
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.	8).			
	and supply the requisite information below and in a preliminary amendment:			
Continuation Divisional Continuation-in-	Group / Art Unit:			
For CONTINUATION or DIVISIONAL APPS only: The entire disclounder Box 4b, is considered a part of the disclosure of the accorreference. The incorporation can only be relied upon when a po	sure of the prior application, from which an oath or declaration is supplied npanying continuation or divisional application and is hereby incorporated by tion has been inadvertently omitted from the submitted application parts.			
17. CORRESPO	NDENCE ADDRESS			
Customer Number or Bar Code Label	or Correspondence address below			
PATENT TR	ADEMARK OFFICE			
Name				
Address				
City Sta	e Zip Code			
City Sian Country Telephone				
	Registration No. (Attorney/Agent) 30,472			
Name (Pnnt/Type) David Lesht	Date 10/09/01			

Signature

Date 10/09/01

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## **FEE TRANSMITTAL** for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	535.	00

Complete if Known		
Application Number		
Filing Date		
First Named Inventor	John W. Polley	
Examiner Name		-
Group Art Unit		
Attornov Docket No.	963 P 001	

METHOD OF PAYMENT FEE CALCULATION (continued)		
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES	
Denocit	Large Small	
Account Number 50-1039		Fee Paid
Deposit Cook Alex McFarron Manzo	Code (\$) Code (\$)  105 130 205 65 Surcharge - late filing fee or oath	
Name Cummings & Mehler. Ltd.		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	
	139 130 139 130 Non-English specification	
Applicant claims small entity status. See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination	
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to	
Check Credit card Money Other	Examiner action  113 1,840* 113 1,840* Requesting publication of SIR after	
FEE CALCULATION	Examiner action	
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month	
Large Entity Small Entity	116 400 216 200 Extension for reply within second month	
Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month	
Code (\$) Code (\$)	118 1,440 218 720 Extension for reply within fourth month	
• • • • • • • • • • • • • • • • • • • •	128 1,960 228 980 Extension for reply within fifth month	
	119 320 219 160 Notice of Appeal	
	120 320 220 160 Filing a brief in support of an appeal	
	121 280 221 140 Request for oral hearing	
114 160 214 80 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 370.00	140 110 240 55 Petition to revive - unavoidable	
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional	
Fee from Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)	
Total Claims 29 -20** = 9 x 9 = 81	143 460 243 230 Design issue fee	
Independent 5 - 3** = 2 x 42 = 84	144 620 244 310 Plant issue fee	
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner	
	123 50 123 50 Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	126 180 126 180 Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)	
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection	
104 280 204 140 Multiple dependent claim, if not paid	(37 CFR § 1.129(a))	
109 84 209 42 ** Reissue independent claims over original patent	149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)	
and over original patent	169 900 169 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 165.00	Other fee (specify)	
**** For Rejectes see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	David Lesht	Registration No. (Attorney/Agent)	30,472	Telephone	312-236-8500
Signature	1 and Ista	, , , , , , , , , , , , , , , , , , , ,		Date	10/09/01

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